

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION		ID NO.	DATE
FEE DETERMINATION	<i>all</i>		<i>06-18-01</i>
O.I.P.E. CLASSIFIER	<i>SA</i>	<i>32</i>	<i>07-25</i>
FORMALITY REVIEW	<i>R.B</i>	<i>1078</i>	<i>08/09/01</i>
RESPONSE FORMALITY REVIEW	<i>SG</i>	<i>1077</i>	<i>10/8/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓ 3/10/01
2	✓ 3/10/01
3	✓ 3/10/01
4	✓ 3/10/01
5	✓ 3/10/01
6	✓ 3/10/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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BEST AVAILABLE COPY

856-75583
10/09/01
856-75583
10/08/01